

TERMINATION / WARNING NOTICE

(CROSS OUT ONE OF THE ABOVE)

Social Security Number 398-28-0060 Classification Operator
Name Mike Saddy
On Last Day 8-13-93 Worked 8 1/2 Hours

Quit With Notice Without Notice Force Reduction
Discharged Off Job Injury

Give Full Reason for Discharge in Space Below

Eligible for Rehire Not Eligible for Rehire

WARNING

First Second Third (Terminated)
Safety Violation (No Warning Required) Insubordination
Other Absenteeism

SUPERVISOR: Check Proper heading and state explanation below:

Supervisor's Signature: _____
Project Mgr./Supt. Signature: _____
Employee Signature: _____
Termination/Warning Date: _____

Time Office (White Copy) Supervisor (Yellow Copy) Employee (Pink Copy)

LAST DAY OF WORK FOR MIKESADDY, SR (RETIRED)